



## POWER OF ATTORNEY

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. *(List name and registration number)*

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## DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

## SIGNATURE(S)

NOTE: Carefully indicate the family (or last) name as it should appear on the filing receipt and all other documents.

Full name of **sole or first inventor** Katherine S. Bowdish

Inventor's signature *Katherine Bowdish* Date 3/21/02  
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Full name of **third joint inventor**, if any Mark Renshaw

Inventor's signature *Mark Renshaw* Date 3/21/02  
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Full name of **fourth joint inventor**, if any \_\_\_\_\_

Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_  
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**CHECK PROPER BOX(ES) FOR ANY OF THE FOLLOWING  
ADDED PAGE(S) WHICH FORM A PART OF THIS DECLARATION**

- ☐ Signature for subsequent joint inventors.  
Number of pages added \_\_\_\_.
- ☐ Signature by administrator(trix), executor(trix) or legal representative for deceased  
or incapacitated inventor.  
Number of pages added \_\_\_\_.
- ☐ Signature for inventor who refuses to sign or cannot be reached by person  
authorized under 37 C.F.R. §1.47.  
Number of pages added \_\_\_\_.

\*\*\*

- ☐ Added pages to combined declaration and power of attorney for divisional,  
continuation, or continuation-in-part (CIP) application.  
Number of pages added \_\_\_\_.

\*\*\*

- ☐ Authorization of attorney(s) to accept and follow instructions from representative.

\*\*\*

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